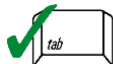




Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention  
**BWP AQ 05 Asbestos Blanket Notification**

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



## 1. Brief Project Description

☐ Incidental Maintenance Activity

☐ Large Scale Asbestos Abatement Project (LSAAP)

(LSAAP's are issued on a building-by-building basis during periods of planned renovations only.)

## 2. Facility Information

Facility Name

Facility Address

Facility Contact

Title

Facility Phone

Facility Owner(s)

Facility Town or City

Phone

Present Use of Facility/Building

Past Use of Facility/Building

Age of Facility/Building

Size of Facility/Building

Number of Structures

Description of Surrounding Area

☐ Residential

☐ Commercial

☐ Rural

☐ Industrial

☐ Institutional

Storage Location

Building

Room No.

Contact Name

Title

## 3. Reason For Request of Blanket

To avoid lengthy delays in processing/evaluation/approval of request for blanket notification, include specifics as necessary i.e.: nature of facility, size of facility, unique nature of project, etc. Submit attachments as necessary.

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## 4. Description of Asbestos Abatement IMA/LSAAP This Application Covers

Include amounts and types of asbestos containing material involved specifications, floor plans, activity schedules etc. which may further help to describe abatement operations. Submit attachments as necessary.

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**Note:** Blankets are issued for a period of not more than 12 months and cannot be extended.

## 5. Project Schedule

Estimated Start Date (MM/DD/YYYY)

Estimated End Date (MM/DD/YYYY)

Please Note: Each individual blanket notification may be used for projects undertaken within the approved time period only. Projects exceeding the approved time period require separate blanket application.

**Note:** If more than one contractor is involved; please list all contractors and respective scope(s) of work on attachment.

## 6. Asbestos Contractor Information

Name

Phone

Extension

Street Address

City Town

Dept of Labor Standards No.

## 7. On-Site Storage

Specific Location of Secured Storage Area

Individual Responsible for Security

Title

## 8. Certification

"I certify that I have personally examined the foregoing and am familiar with the information contained in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment. I am aware that this permit application or notification shall not be deemed valid unless payment of the applicable fee is made."

Signature

Printed Name

Title

Date (MM/DD/YYYY)

## 9. Submission of Application

**Note:** MassDEP review will begin only after your submissions have been received at both locations.

STEP 1: Submit Application	STEP 2: Submit Fee Payment
<p>Send the following materials to the appropriate MassDEP Regional Office*, Attention: Asbestos Section:</p> <ul style="list-style-type: none"> <li>— This original completed and signed form.</li> <li>— A copy of the check/money-order from Step 1.</li> <li>— Any attachments that fully answer questions on this form.</li> <li>— All supporting documentation.</li> </ul> <p>*Find the MassDEP Regional Office for the community where this work will be done:  <a href="https://www.mass.gov/service-details/massdep-regional-offices-by-community">https://www.mass.gov/service-details/massdep-regional-offices-by-community</a></p>	<p>Send the materials below to:</p> <p>MassDEP  P.O. Box 4062  Boston, MA 02211</p> <ul style="list-style-type: none"> <li>— A copy of this completed and signed form.</li> <li>— Fee payment of \$200 (check or money order payable to "Commonwealth of Massachusetts").</li> </ul> <p>Please Note: Decals may no longer be used to pay Blanket Notification fees.</p>